# FORM D



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THOMSON UNIT

THE COMMISSION

THE COMMISSION

FINAN

Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB API	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated average	hurden

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16.00

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Prefix		Serial	
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hours per response .....

Name of Offering ( check if this is an an	nendment and name has	s changed, and indica	ite change.)		
Class 1 Beneficial Interests in Cole WG E	Bartlett TN DST, a Del	laware statutory tru	ıst		
Filing Under (Check box(es) that apply):	☐ Rule 504	□ Rule 505		☐ Section 4(6)	☐ ULOE
Type of Filing: New Filing	☐ Amendment				
		SIC IDENTIFICA	TION DATA		
1. Enter the information requested about th					
Name of Issuer (☐ check if this is an	n amendment and name	has changed, and inc	dicate change.)		
Cole WG Bartlett TN DST, a Delaware	statutory trust (the "	Trust")			
Address of Executive Offices	(Nı	imber and Street, City	y, State, Zip Code)	Telephone Number (Inc.	uding Area Code)
2555 East Camelback Road, Suite 400,	Phoenix, Arizona 850	)16		(602) 778-8700	
Address of Principal Business Operations	(Nı	imber and Street, Cit	y, State, Zip Code)	Telephone Number (Inc.	uding Area Code)
(if different from Executive Offices)	same			same	
Brief Description of Business					
To own a single-tenant commercial proj	perty known as Walg	reens in Bartlett, To	ennessee (the "Prop	erty"), leased to Walgro	eens Co.
Type of Business Organization					SOURCE SALES
☐ corporation	☐ limited partnershi	ip, already formed	Other (please)	e specify) Delaware statu	fory trust
☐ business trust	☐ limited partnershi	ip, to be formed		1 11	3
				11 11 1850	a a zuon 🔪 🗀 🔃 🔠
Actual or Estimated Date of Incorporation	or Organization: Mon	$ \begin{array}{c c}  & \text{Year} \\ \hline  & 0 & 5 \end{array} $		□ Estimated	
Jurisdiction of Incorporation or Organization	•	. Postal Service abbre a; FN for other foreig		DE	

### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S.Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA

## 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				istanugnig i ai ujoi
Cole Capital Partners, LLC					
Business or Residence Addres					
2555 E. Camelback Road, S Check Box(es) that Apply:	uite 400, Phoenix, A  ☐ Promoter	Nrizona 85016  ⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, if					Managing Partner
run Name (East name mst, n	individual)				
Cole WG Bartlett TN, LLC Business or Residence Address		not City, State Zin Code)			
Dusiness of Residence Address	s (Number and Suc	et, City, State, Zip Code)			
2555 E. Camelback Road, S				E Direction	12 Maria 12
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ Manager of Trust
Full Name (Last name first, if	individual)				
Equity Fund Advisors, Inc.					
Business or Residence Address	ss (Number and Stre	eet, City, State, Zip Code)			
2555 E. Camelback Road, S					
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer (1)	☑ Director(1)	☐ General and/or  Managing Partner
Full Name (Last name first, if	individual)				ividilagilig r attitet
Cole, Christopher H.					
Business or Residence Addres	ss (Number and Stre	eet, City, State, Zip Code)			
2555 E. Camelback Road, S	uite 400 Phoenix	7 85016			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer(1)	☐ Director	☐ General and/or
Full Name (Last name first, if	individual)				Managing Partner
run rame (East name mat, n	marviduary				
Koblenz, Blair D. Business or Residence Address	cs. (Number and Str	set City State 7 in Code)			
Dusiness of Residence Addres	ss (Inumber and Sur	set, City, State, Zip Code)			
2555 E. Camelback Road, S			□ F (1)	<b>5</b> 5:	П С1
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer(1)	☐ Director	☐ General and/orManaging Partner
Full Name (Last name first, if	individual)				
Pons, John					
Business or Residence Addre	ss (Number and Str	eet, City, State, Zip Code)			
2555 E. Camelback Road, S	uite 400. Phoeniy.	A.Z. 85016			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first, it	findividual)				Managing Partner
i an i vamo (Dase name mot, m	uiriduuij				
Business or Residence Addre	ss (Number and Str	eet, City, State, Zip Code)			
	,				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, it	f individual)			.,	Trandging Latery
Business or Residence Addre	ss Number and Str	eet City State 7in Code)			
(1) Executive Officer or Dir	ector of Equity Fu	nd Advisors, Inc., Manager	of the Trust.		

				В.	INFORMA	TION ABOU	JT OFFERI	NG				
1 II 41											Yes	No
I. Has th	ie issuer soid,	or does the		-				J		•••••		×
2 What	ic the minimu	ım invectme		-	-		_				\$202	,200 (2)
z. Wilat	is the minime	iii iiivesiiie	ant that with	oc accepted	nom any m	uividuai:	****************		******************	*******************	Yes	No
3. Does t	he offering p	ermit joint o	wnership of	f a single un	it?						1€3	
		-	•	_		ill be paid o	r given, dire	ectly or indi	rectly, any c	ommission		
or sim	ilar remunera	ition for sol	icitation of	purchasers i	n connection	n with sales	of securitie	s in the offe	ring. If a p	erson to be		
					o de física a	ire associate	a persons o	i such a bro	ker or deare	r, you may		
or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)  Cole Capital Corporation  Business or Residence Address (Number and Street, City, State, Zip Code)  2555 E. Camelback Road, Suite 400, Phoenix, AZ 85016  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)  X[AL] X[AK] X[AZ] X[AR] X[CA] X[CO] X[CT] X[DE] X[DC] X[FL] X[GA]												
	•		1)									
Cole Capit	al Corporation	tress (Numbe	er and Street (	City State 7	in Code)							
					ip Code)							
			Phoenix, AZ	85016								
Name of As	Socialed Bloke	of Dealer										
States in W	hich Person Lis	sted Has Solid	cited or Intend	is to Solicit P	urchasers		n' - 1					
												All States
											X[HI]	X[ID]
										X[MN] .	X[MS] X[OR]	<b>X</b> [MO] <b>X</b> [PA]
											X[WY]	[PR]
E HAL	(T. ) (C. )		1\									
Full Name	(Last name firs	t, if individua	11)									
Business or	Residence Ad	dress (Numbe	er and Street,	City, State, Z	ip Code)						<del> </del>	
Name of A	ssociated Broke	er or Dealer										
States in W	hich Person Li	sted Has Soli	cited or Intend	ds to Solicit P	urchasers		-					
				•••••						•••••	•••••	🗆 All States
											[HI]	[ID]
										• •	[MS] [OR]	[MO] [PA]
											[WY]	[PR]
Full Name	(Last name firs	t, if individua	ıl)							. ,,		
Business or	Residence Ad	dress (Numb	er and Street,	City, State, Z	ip Code)							
Name of A	ssociated Brok	er or Dealer										
04-1	u.: 1 D	4 171 0 "	-1-1-7	4- 4- G V V -								
	'hich Person Li All States" or c				urcnasers							
[AL]	[AK]	(AZ)	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [TU]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

(2) CCP, the sponsor of the Trust, may determine in its sole discretion to accept an investment for less than the minimum.

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Offering Price Sold Type of Security Debt ..... Equity..... ☐ Preferred ☐ Common Convertible Securities (including Warrants) Partnership Interests Other (Specify) Class 1 Beneficial Interests Total..... \$ 2,022,000 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors ..... Non-accredited Investors Total (for filings under Rule 504 only) N/A N/A Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Not Applicable Type of Dollar Amount Security Sold Type of offering Rule 505 N/A Regulation A N/A N/A Rule 504 N/A N/A N/A Total N/A a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Printing and Engraving Costs

(3) Includes legal, printing, and other direct and indirect expenses.

\$ 45,000

\$ 121,320

\$ 186,540

 $\boxtimes$ 

 $\boxtimes$ 

Legal Fees (3)

Accounting Fees.

Engineering Fees .....

Sales Commissions (specify finders' fees separately)

Other Expenses (identify) Marketing Allowance and due diligence \_\_\_\_\_

Total

(5) Incluthe Prop	nce Coordination Fee. udes an estimated allowance for reimbursement to CCF perty by the Trust in the amount of \$8,290. Also includ- aining portion of the Acquisition Fee was paid by the s	es a portion of an Acquisition l	ee received	by an affiliate of CC		
Blair D	). Koblenz	Executive Vice Preside	ent of Equity	Fund Advisors, Inc.	Manage	er of the Trust
Name c	of Signer (Print or Type)	Title of Signer (Print of	Type)			
	/G Bartlett TN DST, a Delaware statutory trust	Signature	1	_		4/1/05
undertaki accredited	or has duly caused this notice to be signed by the undersigning by the issuer to furnish to the U.S. Securities and Excha d investor pursuant to paragraph (b)(2) of Rule 502.  Print or Type)	ed duly authorized person. If this ange Commission, upon written in Signature	s notice is file equest of its	ed under Rule 505, the staff, the information	e followii furnished	ng signature constitutes at by the issuer to any non
	Column Totals		🗵	\$ <u>75,910</u> ⊠ \$ <u>1,8</u> :	 35,460	\$\$ \$_1,759,550
	Other (specify) <u>transfer taxes</u>			\$	- 🛛	\$44,700
	Working capital			\$ \$		\$ \$
	Repayment of indebtedness			\$		\$
	Acquisition of other businesses (including the value of sec offering that may be used in exchange for the assets or sec issuer pursuant to a merger)	urities of another				
	Construction or lease of plant buildings and facilities	• •		\$		\$
	Purchase of real estate			\$_46,410(5) \$	_ 🗵	\$ <u>1,714,850</u> \$
	Salaries and Fees			\$ 29,500(4)		Others \$
				Payments to Officers, Directors & Affiliates		Payments to
5.	Indicate below the amount of the adjusted gross used for each of the purposes shown. If the am estimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set forth in	ount for any purpose is not late. The total of the payment	cnown, furn s listed must	ish an equal		
						\$ <u>1,835,460</u>
	the "adjusted gross proceeds to the issuer."	·····		11444444		D1 D2# 160

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions  Yes of such rule?
	See Appendix, Column 5, for state response.
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CF 239.500) at such times as required by state law.
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offeree
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burd of establishing that these conditions have been satisfied.
	e issuer has ready this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned dunorized person.
	THE FOREGOING UNDERTAKINGS AND REPRESENTATIONS ARE PROVIDED AND SHALL BE ENFORCEABLE AGAINST THE ISSUE LY TO THE EXTENT THAT SUCH UNDERTAKINGS AND REPRESENTATIONS ARE REQUIRED TO BE MADE AFTER APPLICATION OF THE TIONAL SECURITIES MARKETS IMPROVEMENT ACT OF 1996.
Is	suer (Print or Type) Signature Date
	ole WG Bartlett TN DST, a Delaware statutory trust
N	ame of Signer (Print or Type)  Title of Signer (Print or Type)
n	lair D. Kahlang

(6) Not applicable for Rule 506 offerings.

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	2		3			4			5	
	to non-a investor	ed to sell ecredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) (6)	
State	Yes	No	Class 1 Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL		Х	\$2,022,000			· · · · · · · · · · · · · · · · · · ·			(6)	
AK		х	\$2,022,000	· · · · · · · · · · · · · · · · · · ·					(6)	
AZ		х	\$2,022,000						(6)	
AR		Х	\$2,022,000						(6)	
CA		X	\$2,022,000						(6)	
СО		х	\$2,022,000						(6)	
CT		Х	\$2,022,000						(6)	
DE		х	\$2,022,000						(6)	
DC		Х	\$2,022,000	·					(6)	
FL		X	\$2,022,000						(6)	
GA		Х	\$2,022,000						(6)	
HI		X	\$2,022,000						(6)	
ID		X	\$2,022,000						(6)	
IL		X	\$2,022,000						(6)	
IN		X	\$2,022,000			·			(6)	
IA		X	\$2,022,000						(6)	
KS		X	\$2,022,000						(6)	
KY		х	\$2,022,000						(6)	
LA		X	\$2,022,000					i	(6)	
ME										
MD		X	\$2,022,000						(6)	
MA		x	\$2,022,000						(6)	
MI		х	\$2,022,000						(6)	
MN		Х	\$2,022,000						(6)	
MS		X	\$2,022,000						(6)	
МО		X	\$2,022,000						(6)	

1	2		3			4			;
	to non-a investor	Type of security Intended to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate Type of investor and amount purchased in State (Part C-Item 1)  (Part C-Item 2)						Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) (6)	
State	Yes	No	Class 1 Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT		X	\$2,022,000						(6)
NE		X	\$2,022,000						(6)
NV		Х	\$2,022,000						(6)
NH		х	\$2,022,000		· · · · · · · · · · · · · · · · · · ·		<u> </u>		(6)
NJ		х	\$2,022,000				V		(6)
NM		х	\$2,022,000						(6)
NY		X	\$2,022,000						(6)
NC		х	\$2,022,000						(6)
ND		X	\$2,022,000	-					(6)
ОН		Х	\$2,022,000						(6)
ОК		Х	\$2,022,000						(6)
OR		Х	\$2,022,000						(6)
PA		x	\$2,022,000						(6)
RI		X	\$2,022,000						(6)
SC		Х	\$2,022,000						(6)
SD		X	\$2,022,000						(6)
TN		X	\$2,022,000						(6)
TX		Х	\$2,022,000						(6)
UT		x	\$2,022,000						(6)
VT		х	\$2,022,000						(6)
VA		X	\$2,022,000						(6)
WA		х	\$2,022,000						(6)
WV		х	\$2,022,000						(6)
WI		Х	\$2,022,000						(6)
WY		Х	\$2,022,000						(6)
PR									